2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# 652459

Entity Name: EQUIPMENT SPARE PARTS LTD., INC.

Current Principal Place of Business:

7220 N.W. 32ND STREET
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

7220 N.W. 32ND STREET
MIAMI, FL 33122

New Mailing Address:

FEI Number: 59-2001272 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAMUELS, AVI
7220 NW 32ND. STREET
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SAMUELS, AVI PRESIDE
Address: 3201 NE 183RD ST, #1904
City-St-Zip: AVENTURA, FL 33160

Title: V ( ) Delete
Name: GRUSHKA, HAIM V.P.
Address: 11231 RENAISSANCE ROAD
City-St-Zip: COOPER CITY, FL 33026

Title: S ( ) Delete
Name: SAMUELS, RAZ SEC.
Address: 9 ISLAND AVENUE APT#701
City-St-Zip: MIAMI, FL 33139

Title: T ( ) Delete
Name: SAMUELS, ROY TREASUR
Address: 9 ISLANDS AVE APT #1809
City-St-Zip: MIAMI, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ABRAHAM SAMUELS PRES 04/13/2009

Electronic Signature of Signing Officer or Director — Date